

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

David L. Goodale

Serial No: 09/780,804

Confirmation No.: 8653

Filed: February 9, 2001

For: LATCH SYSTEM AND MODIFIED BLADE DESIGN
FOR THICK STOPPER-CLOSED CONTAINER
SAMPLING PIERCING STATION



Art Unit: 1743

Examiner: Dwayne K. Handy

I hereby certify that this correspondence is
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Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

October 27, 2005

Date of Deposit

Diane Zynn

Name

10/27/05

Signature

Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application, along with the following documents:

- ☒ Terminal Disclaimer
- ☒ Information Disclosure Statement
- ☒ Return postcard.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	19	-	30	**	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	4	-	3	***	1	LG=\$200 SM=\$100	\$ 200
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$ 0
Independent Claims: 1, 5, 21, 25					TOTAL		\$ 200

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ Please charge the fee of **\$200** for the additional claim fees to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☐ Please charge the fee of \$___ for the extension of time to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
 - ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
 - ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

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